

DECLARATION FOR UNITED STATES PATENT APPLICATION

Docket No. SAE-22

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled, PENICILLIN DERIVATIVES AND PROCESS FOR PREPARATION OF THE SAME the specification of which:

(check one) ☒ is attached hereto.

☐ was filed on _____ as Appl. Serial No. _____ and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, 1.56(a). I hereby claim foreign priority benefits under Title 35, United States Code, 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)

NUMBER	COUNTRY	DAY/MONTH/YEAR FILED	PRIORITY CLAIMED
<u>233967/1982</u>	<u>Japan</u>	<u>24/12/1982</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>21200/1983</u>	<u>Japan</u>	<u>10/02/1983</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	(Status: <input type="checkbox"/> Patented <input type="checkbox"/> Pending <input type="checkbox"/> Abandoned)
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby appoint MURRAY & WHISENHUNT, P. O. Box 40574, Washington, D.C. 20016, telephone no. (703)243-0400 (to whom all communications are to be addressed) and the partners thereof, Robert B. Murray, Reg. No. 22,980 and Fred S. Whisenhunt, Reg. No. 24,378, individually and jointly my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and with the resulting patent.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Ronald G. Micetich
 Inventor's signature [Signature] Date 16th May 1983
 Residence Alberta T-8A-3V-6, Canada Citizenship Canada
 Post Office Address 12, Braeside Terrace, Sherwood Park, Alberta, T-8A-3V-6,
Canada

Full name of joint inventor, Shigeru YAMABE
 Inventor's signature [Signature] Date June 20, 1983
 Residence Kobe-shi, Hyogo-ken, Japan Citizenship Japan
 Post Office Address 1-2-7, Sumiyoshi-kamokogahara, Higashinada-ku,
Kobe-shi, Hyogo-ken, Japan

(Attach second page when needed for further joint inventors; if any)

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Full name of joint inventor, Motoaki TANAKA
Inventor's signature Motoaki Tanaka Date June 20, 1983
Residence Tokushima-shi, Tokushima-ken, Japan JPV
Citizenship Japan
Post Office Address 13-54, Matsuoka, Kawauchi-cho, Tokushima-shi,
Tokushima-ken, Japan
401-01

Full name of joint inventor, Makoto KAJITANI
Inventor's signature Makoto Kajitani Date June 20, 1983
Residence Tokushima-shi, Tokushima-ken, Japan JPV
Citizenship Japan
Post Office Address 831, Nishiyama, Kamihachiman-cho, Tokushima-shi,
Tokushima-ken, Japan
401-01

Full name of joint inventor, Tomio YAMAZAKI
Inventor's signature Tomio Yamazaki Date June 20, 1983
Residence Itano-gun, Tokushima-ken, Japan JPV
Citizenship Japan
Post Office Address 125-46, Aza-Higashinakazu, Okuno, Aizumi-cho,
Itano-gun, Tokushima-ken, Japan
401-01

Full name of joint inventor, Naobumi ISHIDA
Inventor's signature Naobumi Ishida Date June 20, 1983
Residence Itano-gun, Tokushima-ken, Japan JPV
Citizenship Japan
Post Office Address 1-163, Aza-Marusu, Hiroshima, Matsushige-cho,
Itano-gun, Tokushima-ken, Japan

Full name of joint inventor, _____
Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of joint inventor, _____
Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of joint inventor, _____
Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____

Full name of joint inventor, _____
Inventor's signature _____ Date _____
Residence _____
Citizenship _____
Post Office Address _____